Chapter 3
Monitoring and Review

Updated October 2022

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INTRODUCTION

The University recognises that effective, risk-based monitoring and action planning activity takes place on an ongoing basis and is not limited to annual processes. The University therefore employs a continuous Monitoring Framework (see Figure 1) to ensure the continuing standards and quality of its academic provision. The processes described below form part of this overarching framework and are fully aligned with the Conditions of Registration for Quality and Standards B1-B5 of the Office for Students' (OfS) Regulatory Framework[1]. Processes are informed by the Framework for Programme Reviews: ensuring the value of courses (Universities UK, 2022)[2].

Annual Monitoring is the capstone process through which the University ensures the continuing standards and quality by taking a holistic look at performance data at a fixed point each year and identifying any emerging trends. The annual monitoring process considers comprehensive quantitative and qualitative evidence on programme performance and the students' academic experience and alerts the Academic Quality Enhancement Committee (AQEC) - and through it, the Academic Board - to any internal or external factors that could place academic provision, including academic partnerships, at risk.

It also enables the identification of good practice for wider dissemination within the University for the purpose of quality enhancement[3]. Outputs from departmental annual monitoring are used to inform the University's academic planning[4] and budget-setting processes.

The purpose of **Periodic Review** is to review and evaluate all taught curriculum within an academic department or other grouping of cognate programmes in the context of its performance, aims and aspirations in a broader University, regional and national context. Each academic department undergoes Periodic Review once every five years.

The purpose and process of **Internal Review** varies according to particular requirements and may *risk-focused*, or *enhancement-focused*, as required.

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[1] https://www.officeforstudents.org.uk/advice-and-guidance/regulation/registration-with-the-ofs-a-guide/conditions-of-registration/.
[2] https://www.universitiesuk.ac.uk/what-we-do/policy-and-research/publications/framework-programme-reviews-ensuring
[3] See Chapter 1.
[4] See Chapter 4

Figure 1: University Monitoring Framework

Planning cycle:	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
Key Reporting Milestones		• Spring Planning Overview report from each faculty to AQEC [quality enhancement] and APC [academic development / business planning]			• Annual Monitoring Update Report to Academic Board. • Annual Retention Report and Institutional Action Plan to Academic Board.		• Report on programmes closed in the previous academic cycle to APC.		• External Examiner Report & Response Overview to EESC.	• Academic Malpractice and Degree Outcomes Data (AQEC) • Autumn Monitoring Overview Report (AQEC) • Academic Assurance Report (Academic Board) • Annual report on degree outcomes (Academic Board).		• Academic Assurance Report to Governors
Principle Institutional Monitoring and Review Functions [process owner]	*Spring Planning [Faculty]*	*Budget Setting [Finance]*						*Autumn Monitoring & Enhancement [GQASC]*				
Faculty/Department Action Plan Updates			• APP - gap analysis	• Progression Metric - Graduate Outcomes analysis	• NSS - analysis		• Continuation and completion data				• In-year retention analysis	
Institutional Steering Group			• APP Steering Group	• Student Outcomes Steering Group	• Student Experience Steering Group		• Student Outcomes Steering Group					
Local Programme Monitoring	*In-year withdrawals, Student attendance (Qwickly), Module modifications log updates,*											
		• Student Voice Survey (course & modules)					• Review of module curriculum (expiry). • Programme Responses to external examiners.		• Student Voice Survey (course)	• Student Voice Survey (modules)		
Ad hoc enhancement, intervention and review.[1]	*Development Enquiry (Enhancement); Thematic Support Panel (Targeted Intervention and Support); Risk Assessment Meeting (Risk Mitigation)*											
Fixed Point Potential Triggers (surveillance)	• HESA Non-continuation data	• Student Voice Survey (course & modules)	• OIA Annual Complaints Statement	• Academic Development Plans • Hot modules • Graduate Outcomes	• NSS	• External Examiner comments	• Continuation • Completion • Overall Module Pass rates		• Student Voice Survey (course)	• Academic Malpractice • Degree Outcomes • Student Voice Survey (modules)	• HESA Degree Outcomes analysis	
Ongoing potential Triggers (surveillance)	*OfS Notification, Student Complaints (Serious), Withdrawal rates, Changes to Subject-Benchmark-Statements / PSRB requirements / Sector-recognised Standards.*											

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THE UNIVERSITY MONITORING FRAMEWORK

The University's Monitoring Framework is based on the premise that:

- Staff at all levels of the Institution are responsible and accountable for maintaining standards and enhancing the quality of students' learning opportunities.
- Shared responsibility and accountability require frank and open exchanges between departments, Faculties, support services and the University (Directorate).
- The processes by which both opportunities and threats to standards and quality are defined, identified and assessed should draw fully on a range of expertise and experience from within and outwith the University's executive and deliberative structures

Key features of the Monitoring Framework (see Figure 2) are that it is:

- **Evidence-based** – a feature of the Monitoring Framework is a new data dashboard, designed to enable academic departments to engage with key performance indicators for Academic Quality and Standards on an ongoing basis. The dashboard brings together various sources of quantitative data including module pass rates; internal progression,[5] retention,[6] and withdrawal data, degree outcomes,[7] the National Student Survey (NSS),[8] Graduate Outcomes,[9] and OfS B3 Data. The Monitoring Framework also draws upon a range of qualitative data sources including staff and student feedback (e.g. module leader reports, Student Pulse Surveys, minutes of Programme Boards and Student-Staff Consultative Fora (SSCFs)[10] and other evidence of feedback as appropriate); reports of external examiners[11] and Professional Statutory and Regulatory Bodies (PSRBs).
- **Risk-based[12]** - drawing upon the experience and expertise of staff and other stakeholders[13] to identify and evaluate potential opportunities and threats, and to propose targeted and proportionate actions to *mitigate* risk. In helping AQEC to form

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[5] The **Internal Progression Rate** is the % of students who 'pass' the year and are eligible to progress to the following year, or who have completed the programme (if they are finalists). Any students who do not have a result yet because they have interrupted, or are referred or deferred, are excluded from the calculation.

[6] The **Internal Retention Rate** is the % of students registered on the programme who returned to the University the following academic year (however briefly), including those who are repeating the year, interrupting or transferring to another programme. This measure is not meaningful for finalists so it is only calculated for non-finalists.

[7] **Internal Completion** is where a student has finished a programme of study and been awarded a university qualification.

[8] www.thestudentsurvey.com/.

[9] Graduate Outcomes Progression Rate is the proportion of graduates in professional employment, further study, or who are retired, travelling, or caring. www.graduateoutcomes.ac.uk.

[10] See Chapter 6.

[11] See Chapter 2.

[12] For a more detailed description of the University's approach to academic risk management see Chapter 1.

[13] Who may include: relevant academic and professional communities; external examiners; regulatory bodies; collaborative partners; employers; service users and carers; and graduate alumni.

a view about a department's ability and capacity to manage risk, Monitoring plays an important part in confirming confidence in the University's managers and staff.

- **Enhancement-focused[14]** – enabling the systematic identification and evaluation of good practice that is suitable for general dissemination for the purpose of enhancing quality across the Institution.

Figure 2: Key Features of the University's Monitoring Framework

Evidence-based		Risk-based		Enhancement-Focussed
• Lead (OfS) Indicators • Other data/KPIs as defined by Directorate • Stakeholder & Student Feedback • External Examiners' Reports	➕	• Evaluative • Predictive • Responsive • Action-focussed • Proportionate	➕	• Strategic • Systematic • Selective

ANNUAL MONITORING

The Annual Monitoring process described in this chapter is focused primarily on academic departments, however the engagement of Faculties and academic-related professional support services enables full and holistic consideration of issues affecting academic standards and quality at Institutional level; for example, outputs from Annual Monitoring can be used to inform Directorate decisions on academic strategy and resources. The minuted discussions of Faculty Boards (or their sub-committees) and AQEC help assure staff and students that issues raised by them during Annual Monitoring have received appropriate consideration. While fixed-point Annual Monitoring provides a clear focus for identifying and resolving risks, monitoring itself is continuous[15]. To this end, all staff are made aware of their responsibility to alert managers to any issues affecting standards and quality that require the immediate attention of the Directorate, PVC Deans of Faculty, the Governance, Quality Assurance and Student Casework unit, AQEC or other relevant Academic Board committees.

Monitoring of modules[16] and programmes

Academic departments are responsible for the detailed evaluation of module performance and holistic consideration of issues affecting standards and quality at programme level. Faculties have oversight of module and programme monitoring occurring within departments[17] - **as a minimum**, this considers:

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[14] For further details of the University's approach to quality enhancement see Chapter 1.

[15] For example, programme performance data is made available to academic departments via Tableau and AQEC receives updates on progress against departments' Quality Enhancement Plans during the academic year, typically through the receipt of Faculty quality committee minutes.

[16] Programmes in Health, Social Care and Medicine that follow a non-modular structure consider this evidence as it relates to each Year of Study.

[17] See Chapter 1.

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- Module first-time and overall pass rates[18];
- Student Voice Survey data[19] and module and programme evaluations;
- Retention, progression and degree outcomes data disaggregated by relevant protected characteristics, where appropriate[20];
- External examiner reports and programme teams' responses[21]

Departmental Annual Monitoring

Departmental Annual Monitoring is informed by programme-level monitoring and assesses an academic department's ability and capacity to manage risk associated with academic standards and the quality of students' learning opportunities. The annual monitoring process at department level is managed centrally by the Governance, Quality Assurance and Student Casework unit and consists of an Annual Monitoring Enhancement Report for all departments listed in Table 1 below:

Table 1: Departmental Planning Units (updated October 2022)

Faculty	Planning Unit	
Faculty of Arts and Sciences	1. Business School 2. Department of Biology 3. Department of Computer Science 4. Department of English and Creative Arts 5. Department of History, Geography and Social Sciences 6. Department of Psychology 7. Department of Sport and Physical Activity 8. Language Centre 9. School of Law, Criminology and Policing	
Faculty of Health Social Care and Medicine[22]	School of Nursing & Midwifery	1. Department of Adult Nursing and Primary Care 2. Department of Mental Health and Learning Disabilities Nursing 3. Department of Women's & Children's Healthcare
	School of Allied Health, Social Work & Wellbeing.	1. Department of Social Work and Wellbeing

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[18] The first-time pass rate includes students who have passed a module in their first attempt at the final assessment point.

[19] See Chapter 6.

[20] www.equalityhumanrights.com/en/equality-act/protected-characteristics.

[21] External examiners confirm that the standards set at validation meet or exceed national threshold (pass) standards and are comparable with similar provision of other UK higher education providers - See Chapter 2.

[22] During the 2022-23 Academic year, the Faculty will be monitored at School level.

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Faculty	Planning Unit	
		2. Department of Allied Health Professions
	Medical School	1. Department of Undergraduate Medicine
		2. Department of Postgraduate Medical Education
Faculty of Education	1. Department of Early Years Education 2. Department of Primary and Childhood Education 3. Department of Secondary and Further Education	

A factual **Annual Monitoring Enhancement Report** (AMER) summarising the Department's performance during the previous academic year is prepared in partnership with the Head of Department and a representative from the Strategic Planning and Policy Unit (SPPU).

In confirming that standards remain secure, the AMER will consider:
- academic and professional benchmarking;
- alignment with sector-recognised standards.
- PSRB Reports (where applicable and available)
- external examiners' reports.

In assessing indicators of quality the report reviews data against Key Performance Indicators[23] for:
- A list of Programme modifications undertaken in the preceding year;
- Instances of academic malpractice;
- Student academic outcomes (e.g., module pass rates (first-time and overall), progression, retention and degree outcomes);
- Student satisfaction – National Student Survey and internal survey data; and,
- Graduate Outcomes – employment, highly skilled employment or further study.

In assessing departments' ability and capacity to manage risk, the report considers:
- The content of the department's 'strategic-level' Quality Enhancement (action) Plan, separated by programme as necessary, based on _the department's_ evaluation[24] of the above indicators of Quality.
- A progress update on the previous actions.

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[23] Key Performance Indicators are defined by the Office for Students as well as the University's Directorate (senior management team).

[24] Heads of Department are provided with detailed datasets disaggregated by relevant protected characteristics to enable a full evaluation of their portfolio.

Affirmation of Standards and Quality

Annual Monitoring Enhancement Reports contain a judgement on threshold Standards and Quality[25] as well as the Department's ability to manage associated risks. Reports are required to affirm, based on consideration of the evidence, that the Department is able to manage its responsibilities in relation to the ongoing conditions for Quality (B1 – B4) and Standards (B5), as follows:

Table 1: The ongoing conditions for Quality (B1 – B4 & B6) and Standards (B5)

B1	The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. A high-quality academic experience includes but is not limited to ensuring that each higher education course: 1. is up-to-date; 2. provides educational challenge; 3. is coherent; 4. is effectively delivered; and 5. requires students to develop relevant skills.
B2	The provider must take all reasonable steps to ensure: 1. students registered on a higher education course receive resources and support to ensure: a. a high quality academic experience for those students; and b. those students succeeding in and beyond higher education; and, 2. effective engagement with students to ensure: a. a high quality academic experience for those students; and b. those students succeed in and beyond higher education.
B3	The provider must deliver successful outcomes for all of its students, which are recognised and valued by employers, and/or enable further study.
B4	The provider must ensure that: 1. students are assessed effectively; 2. each assessment is valid and reliable; 3. academic regulations are designed to ensure that relevant awards are credible; 4. academic regulations are designed to ensure effective assessment of technical proficiency in the English language in a manner that appropriately reflects the level and content of the course; and 5. relevant awards granted to students are credible at the point of being granted and when compared to those granted previously.
B5	The provider must ensure that, in respect of any relevant awards granted to students who complete a higher education course provided by, or on behalf of, the provider (whether or not the provider is the awarding body): 1. any standards set appropriately reflect any applicable sector-recognised standards; and 2. awards are only granted to students whose knowledge and skills appropriately reflect any applicable sector-recognised standards.

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[25] I.e., whether programmes have met or not met the national Expectations for Standards and Quality as set out in the OfS's Regulatory Framework.

Annual Monitoring Enhancement Meeting

The Annual Monitoring Enhancement Meeting provides an opportunity for the Head of Department to discuss their AMER with their Pro Vice-Chancellor Dean of Faculty and a member of the GQASC team. The meeting is organised by GQASC and is conducted in the spirit of appreciative enquiry, tailored to the needs of the department as determined by the evidence.

Based on the evidence contained within the AMER, and further discussion with the Head of Department during the Annual Monitoring Enhancement Meeting, the Pro Vice-Chancellor Dean of Faculty is asked to make one of the following **confidence judgements** in regard to the Department's ability to manage its quality assurance responsibilities:

No significant issues identified in the evidence presented, and I am supportive of the enhancement activities identified by the Department.	Some areas highlighted for improvement and additional actions have been identified.	Significant issues identified within the evidence considered and there are concerns regarding the Department's action planning.

Judgements are reached by triangulating external examiner reports and responses, PSRB reports (where available) and 'contextualised' performance data. Beyond threshold, comparisons are made between programme performance data and appropriate benchmarks. Any data which falls below benchmark is contextualised and commented upon by the Head of Department and actions are formally recorded in a Quality Enhancement Plan (below).

Quality Enhancement Plans

The Quality Enhancement Plan (QEP) is divided into two sections:

1. Agreed actions in response to indicators of Standards and Quality (performance data); and
2. A summary of good practice linked to evidenced improvements/ exemplary performance against Institutional benchmarks.

In part 1 of the QEP, Heads of Department state concisely what is being done and / or will be done to improve performance (in the spirit of SMART action planning). This means that actions are linked directly to programmes or areas where performance has fallen below the benchmark set by the University. Actions are set at an appropriate, departmental level and need not contain operational details.

The QEP acknowledges that each Department is required to produce a separate Access & Participation Plan, a Retention Action Plan, and an NSS Action Plan earlier in the University's Monitoring Framework cycle. While departments are not required to duplicate actions between plans, it is expected that Heads of Department will provide brief updates on the actions in the body of the AMER where appropriate.

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Part 2 of the QEP provides a summary of specific features of good practice with the potential for wider dissemination across departments and/ or Faculties. Good practice citations are linked to external examiners' reports, previous validation and/ or periodic review reports, evidenced improvements in performance data between academic years or programmes/ subject areas which show exemplary performance against Institutional benchmarks.

Faculties consider if the issues raised by the data have been addressed sufficiently within the report and in the QEP. Where this is deemed not to be the case, reports and / or plans are referred back for further work. Completed reports (including the QEP) are submitted to the GQASC for 'in principle' approval. Final approval is granted by AQEC[26].

Part 1 of the QEP is considered a live document which can be updated by departments at any time during the academic year when data becomes available, or progress has been made. Faculties monitor progress against the actions contained within part 1 of the QEP. Faculties receive updated plans for discussion, exploring where updates have not been provided or if updates require more detail. All progress updates are expected to be completed by the end of the academic year. The Governance, Quality Assurance and Student Casework unit (GQASC) uses the final versions of the QEPs as part of the evidence for the next Annual Monitoring round.

GQASC produces an overview document which highlights key themes from departmental annual monitoring. As well as providing the basis of discussion by AQEC[27], this overview also informs production of the University Annual Monitoring Update Report (below).

Annual Monitoring for PSRBs

Programmes that are regulated by Professional Statutory and Regulatory Bodies (PSRBs) may be required to submit external monitoring reports to meet their specific requirements. These will normally be received for approval by Faculty Boards (or their committees) but should be referred for additional consideration by AQEC where any issues requiring University level attention are identified.

For further details on the annual monitoring process, please contact the Governance, Quality Assurance and Student Casework unit. For specific queries on the quantitative data used, please contact the Strategic Planning and Policy Unit.

Annual Review of Academic Partnerships

Edge Hill University develops academic partnerships with a wide range of third-party organisations, from UK-based employers, colleges and awarding bodies to overseas higher education providers, for the delivery of modules or programmes leading to the award of University credit or qualifications; or the provision of student learning opportunities including work placements, international exchanges and arrangements for entry with advanced

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[26] Normally at the February meeting.
[27] At its February meeting.

standing (articulation). The Annual Review of Academic Partnerships operates in conjunction with Departmental Annual Monitoring but is a separate process reflecting the level of risk associated with partnership working. Full details are provided elsewhere in this Handbook[28], however for partnerships in Category C and above including Higher and Degree Apprenticeships this entails the completion of an **Annual Review Form** at the start of each new academic year for any provision delivered in the previous academic year. This is usually completed by the Academic Partnership Liaison Tutor with support and input from the Faculty Partnership Lead, and supporting evidence includes external examiner reports, retention and other performance data, and student feedback. Annual Review may also revisit current programme Delivery Plans, due diligence, online marketing materials and staffing arrangements. Completed forms receive Faculty-level scrutiny and approval[29] prior to their submission to AQEC[30], which:

- assesses, on the basis of the evidence provided, the ability and capacity of the partner organisation (working with the University) to identify and manage academic risk;
- provides feedback to Faculties, departments and partners or, where necessary and appropriate, requests additional information from them; and
- considers any additional scrutiny and/ or support for a partner or host University department that may be indicated by the Annual Review Form or other relevant evidence.

GQASC produces an overview document[31] which highlights key themes from annual monitoring of academic partnerships. As well as providing the basis of discussion by AQEC[32], this overview also informs production of the University Annual Monitoring Report (below).

University Annual Monitoring Update Report

The University Annual Monitoring Update Report, which is received by AQEC[33] and approved by the Academic Board[34], provides an update on the actions identified during the monitoring process. Drafted by GQASC on behalf of the PVC (Student Experience) & University Secretary[35], the University AMR highlights issues for attention by the Academic Board, Faculties and professional support services, giving particular emphasis to the longer-term and strategic implications of its assessment of risk in the context of external market and regulatory conditions. The University AMR is a key mechanism in promoting a culture of mutual accountability for the maintenance of standards and enhancement of quality and in so doing addresses the following audiences:

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[28] See Chapter 5.
[29] With representatives of partner organisations attending by invitation.
[30] At its February meeting.
[31] Jointly authored by the GQASC and Faculties.
[32] At its February meeting.
[33] At its June meeting.
[34] At its July meeting.
[35] Also the Chair of AQEC.

- **Academic departments and academic partner organisations**, which expect to see the broad concerns raised by them through the Annual Monitoring process have been considered and responded to; and
- **AQEC and Academic Board**, which require assurance that the University's academic governance is being managed appropriately.

Academic Assurance Report

The Academic Assurance Report (AAR) is authored by GQASC on behalf of Academic Board and it is informed by the University AMR. It provides supporting evidence of the maintenance of standards and quality for the Board of Governors' annual accountability return to the Office for Students ([36])OBJ. The AAR maps current Institutional processes and outcomes to the OfS's General Ongoing Conditions of Registration, specifically Conditions B1-5 for Quality and Standards. A draft AAR is approved by Academic Board[37] with the final version received for consideration by the Board of Governors.

PERIODIC REVIEW

The purpose of Periodic Review is to review and evaluate all taught curriculum in a particular department or other cognate grouping of programmes (planning unit[38]), in order to:

- Confirm that the academic standards set at programme validation remain appropriate and are being demonstrated by students through assessment and achievement of their awards.
- Confirm that the quality of the student learning experience is being maintained and enhanced.
- Address, in an holistic way, any issues concerning curricula, teaching, learning and assessment, student support, staffing and resources, course organisation and quality assurance that apply to the department's whole provision.
- Consider the department's academic strategy and direction in the context of the University's mission, provision and students as well as national and regional agendas, exploring new areas for programme development or the re-focusing or closure of existing provision[39].
- Consider trends in student recruitment, retention, progression and completion, including graduate employment, across the whole of the department's portfolio from sub-degree to Masters level.
- Capture the 'voices' of current students, employers and alumni (through focus groups).

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[36] For more detail on the Office for Students and associated sector regulation see Chapter 1.
[37] At its November meeting.
[38] See Chapter 4.
[39] Informing discussions that will take place during Departmental Academic Planning – see Chapter 4.

- Use evidence of standards and quality to support continued approval of the department's programmes and awards.

Periodic reviews are programmed on a five-year cycle, the schedule and any changes to it being confirmed annually by AQEC (see Table 3 below).

An Institution-level panel drawn from the membership of the Validation and Audit Standing Panel[40] makes judgements on the overall academic health of the department and its programmes based on its reading of review documentation and separate discussions held with staff, students and employers. Periodic Review reports are received by AQEC where the review panel's recommendations are considered and continued approval of all validated programmes normally confirmed although individual programmes may be referred to the host Faculty for modification or re-validation before the next student intake.

Periodic Review considers any programmes delivered by or with third-party organisations (academic partners) for the purpose of continuing programme approval, however these are also reviewed individually as part of a separate five-year cycle of partner and delivery re-approval[41].

Faculties are advised against instigating standalone re-validation in the year of, or year before, a department's scheduled Periodic Review, although circumstances may make this unavoidable, such as the need to implement revised PSRB standards. Where a programme's re-validation[42] is scheduled *in same year* as Periodic Review, the requirement for a Critical Review document is replaced by the standard validation documentation and the AMER completed in the same year as part of the Annual Monitoring process. If scheduled separately, Periodic Review and re-validation events should ideally be held three months apart to allow some opportunity for the review's outcomes to inform the validation process.

Where Periodic Review is scheduled for *the year following re-validation* the review process is determined by the re-validation's scope, for example:

- where the majority of the department's programmes were re-validated the previous year, the requirement for a Critical Review document is replaced by the AMER, which supports continuing programme approval; or,
- where a minority of programmes were re-validated, a standard periodic review is completed.

Application to AQEC for **deferment of a scheduled Periodic Review** is normally supported by a Departmental Risk Assessment (see below). Reviews may be deferred for one year only.

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[40] See Chapter 4, also https://go.edgehill.ac.uk/pages/viewpage.action?pageId=71188453.
[41] See Chapter 5.
[42] See Chapter 4.

Table 3: 'Edge Hill University Periodic Review Cycle' (updated April 2022)

Year no. in cycle	Academic Year	Faculty	Unit of periodic review
1	2022-2023	FAS	Biology[43]
		FAS	Business School[44]
		FAS	English, History and Creative Writing[45]
		FAS	The School of Law, Criminology and Policing[46]
		FOE	Early Years Education[47]
		FOE	Primary and Childhood Education[48]
2	2023-2024	FAS	Edge Hill Language Centre[49]
		FAS	Psychology
		FHSCM	Social Work and Wellbeing[50]
		FHSCM	Allied Health Professions
3	2024-2025	FHSCM	Adult Nursing and Primary Care
		FHSCM	Women's and Children's Health Care
		FHSCM	Mental Health and Learning Disabilities Nursing
4	2025-2026	FAS	English and Creative Arts[51]
		FAS	Sport and Physical Activity
		FOE	Secondary and Further Education
		FHSCM	Social Work
5	2026-2027	FAS	History, Geography and Social Sciences
		FAS	Computer Science
		FAS	Engineering
		FHSCM	Undergraduate Medicine
		FHSCM	Postgraduate Medical Education
		Institution	Taught Degrees Framework[52]

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[43] Deferred from 2021-22.

[44] To include the PGCert Teaching in Higher Education. Deferred from 2021-22.

[45] Deferred from 2021-22.

[46] Formerly the Department of Law and Criminology

[47] Deferred from 2021-22.

[48] Formerly the department of Children, Education and Communities

[49] Credit-bearing provision comprises the University Foundation Certificate International Foundation Programme, the Stem Foundation Year, the level 3 Fastrack programme, and foreign Language Study modules.

[50] New department effective from August 2022 merging the Faculty's Applied Health and Social Care and Social Work provision.

[51] New department effective from August 2022 merging the Faculty's English and Creative Writing provision and the existing Department of Creative Arts.

[52] Using a variation of the process for Internal Audit – see Quality Management Handbook Chapter 3.

Programme Transfers between Departments

Where programme transfer between departments creates the risk of individual programmes not being reviewed within a five-year period, the AMER process, carried out at the next available monitoring point, supports continuing programme approval.

> **A full description of the periodic review process and associated documentation is contained** in *'Preparing for Periodic Review: A Guide for Panels and Departments'*

QUALITY & STANDARDS ASSURANCE: Ad-hoc Monitoring and Review Mechanisms

In addition to routine monitoring and review, the University may commission ad-hoc work to gain assurance about quality and standards to respond to an emerging issue or deliver enhancement. These mechanisms are detailed in the Table 4.

Table 4: Ad-hoc monitoring and review mechanisms

Function	Purpose	Commissioned by
Internal Audit	**Assurance**: The role of internal audit is to provide independent assurance that the University's risk management, governance and internal control processes are operating effectively. Assignments to review the quality of the University's academic provision and governance arrangements feature throughout the annual Internal Audit Plan. Audit assignments are conducted by the University's Internal Auditors in line with timescales agreed the Audit Committee.	Audit Committee – in liaison with Senior Managers and the University's Internal Auditors

Developmental Enquiry	**Enhancement**: Thematic and enhancement-focused by nature, Developmental Enquiries (DEs) explore specific aspects of the learner experience; recent DEs have focused on cross-Faculty approaches to managing placement-based learning, the joint honours student experience and developing students' assessment literacy. Written and oral evidence is taken from key Institutional stakeholders and the report, which is normally received by LTC, contains recommendations for development as well as highlighting good practice for wider dissemination. LTC decides upon any action to be taken in response to the report's recommendations and progress is monitored through separate update reports, the timing and frequency of which are determined by the committee. Developmental Enquiries are serviced by GQASC. Timescales are agreed by LTC.	Learning and Teaching Committee
Thematic Support Panel	**Targeted support**: Thematic Support Panels may be convened to provide a rapid response to an emerging issue or when a department or collection of departments require external support to deal with a strategic challenge. Panels are designed to be supportive, and solution focussed – with external expertise brought in to share relevant experience and provide 'critical friend' challenge. Panels will normally be comprised of at least two individuals that are external to the department(s), who will meet with the Head(s) of Department and relevant staff in a roundtable discussion setting. Membership will be based on the area of weakness being considered, for example - support to boost graduate level employment would likely include the Head of Careers. Panel membership and timescales will be set by the body commissioning the panel. Actions from the meeting will be recorded by the academic department. Where multiple departments are involved, each department will record the actions that are relevant to them.	Directorate (either directly, or at the request of the relevant Head of Department) or Learning and Teaching Committee
Risk Assessment Meeting	**Risk mitigation**: A Risk Assessment Meeting may be convened at very short notice and enables a rapid response to a specific presenting issue, incident or set of circumstances, for example an adverse external examiner's report. An Institutional panel chaired by a	

	senior manager is convened and considers written and oral evidence with a report submitted to AQEC and the Directorate within two to six weeks of commissioning. Risk Assessment meetings are normally serviced by GQASC.	
Risk Assessment Report [desk-based]	**Risk mitigation**: Departmental Risk Assessments normally comprise the department's most recent Annual Monitoring Report and updated QEP, accompanied by the reporting officer's summary estimation of net risk. Whether or not academic provision is deemed to be at risk depends on the interaction between the internal or external threats to which it is exposed and its owner's capacity to manage these, resulting in an evaluation of net risk; thus, a department operating in a high-risk environment may be assigned a rating of medium or even low net risk based on its perceived ability to manage those risks. Departmental Risk Assessment Reports are a useful tool for confirming the continuing academic health of a department or programme, enabling swift conclusions to be drawn and any immediate support needs identified. Risk Assessment Reports are conducted by GQASC. Timescales are set by AQEC.	